

**Application for Amendment of
Notary Public Appointment/Information**

State of Nevada



AMEND THE FOLLOWING: (please mark one)

Mailing Address ☐ Name ☐ County ☐ \$ 10.00

Duplicate Certificate ☐ \$ 10.00

Amount Attached \$

Name of Applicant:

Mailing Address:

Phone Number:

Length of Residence in County:

Date of Expiration of Present Appointment:

Notary Number:

Applicant's Signature: (Please sign this application exactly as you wish it to read on your appointment.)

Signature _____

Please print your name exactly as you wish it to read on your appointment.

Prior Name:

Prior County:

**SUBMIT A COPY OF YOUR CURRENT NOTARY
CERTIFICATE WITH THE FEE OF \$10.00 TO:**

Secretary of State
101 North Carson Street - Suite 3
Carson City, Nevada 89701-3714
Phone (775) 684-5708